

NAME: _____
(FIRST) (MIDDLE) (LAST)

OCA: _____
(COMPLETED BY OFFICER)

STREET ADDRESS: _____

CITY/STATE/ZIP:

TELEPHONE: () _____ I READ AND WRITE THE ENGLISH LANGUAGE ☐ YES ☐ NO

I VOLUNTARILY MAKE THE FOLLOWING WRITTEN STATEMENT TO THE JUNEAU COUNTY SHERIFF'S DEPARTMENT.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

CONTINUED ☐

I HAVE READ THIS STATEMENT, AND NOW SIGN IT AS BEING TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: X **WITNESS SIGNATURE:**

DATE: **TIME:** **AM / PM** **PAGE** **OF** **PAGES**

[illegible]

SIGNATURE: X **WITNESS SIGNATURE:** _____

DATE: _____ **TIME:** _____ **AM / PM** _____ **PAGE** _____ **OF** _____ **PAGES**

INSTRUCTIONS FOR COMPLETING STATEMENT

- ***Fill in the blanks on the form, starting at the top with your name, date of birth, etc. PLEASE PRINT CLEARLY!***
- ***Write out your statement. Tell us what happened in your own words.***
- ***Be clear and concise. Use First and Last Names, Indicate the date and time you are talking about. Write your statement in chronological order-as it happened.***
- ***Give complete descriptions of persons, property and locations when known.***
- ***Make sure that you sign and date the form in front of a witness and that they sign the form as well. You and the witness must sign each page that is written on.***
- ***If you need more pages, print out additional copies of page 2.***
- ***Mail the statement form back to the Sheriff's Department at the address below;***

***Juneau County Sheriff's Department
200 Oak Street
Mauston, WI 53948***

***Attn: _____
(Officer or Case #)***